| Fill | in this information to identify your case: | | | | |
|--------------------|--|--|---------|----------------------|---|
| | | | Ch | eck if this is: | |
| | | | | An amended filing | |
| 1 | otor 2ouse, if filling) | | | | |
| Unit | red States Bankruptcy Court for the: EASTERN DISTRICT OF PENNS | YLVANIA | | MM / DD / YYYY | |
| | nown) 18-10743 | | | | |
| 0 | fficial Form 106J | | | | |
| | chedule J: Your Expenses | Andrea McElhone An amended filing Amen | | | |
| info nur Par | ormation. If more space is needed, attach another sheet to this to the report of the state of th | e filing together, both form. On the top of an | are eq | ually responsible to | or supplying correct your name and case |
| 1. | Is this a joint case? | | | | |
| | ■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | ☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i> | for Separate Househol | d of De | ebtor 2. | |
| 2. | Do you have dependents? ☐ No | | | | |
| | YAS | | hip to | • | |
| | Do not state the | | | | □ No |
| | dependents names. | Son | | 2 | |
| | | Daughter | | 5 | |
| | | Daugittei | | | |
| | | Daughter | | 14 | |
| | | | | | □ No |
| 3. | expenses of people other than | | | | ☐ Yes |
| Par | | | | | |
| exp | | | | | |
| the | lude expenses paid for with non-cash government assistance it value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.) | | | Your exp | enses |
| 4. | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | nclude first mortgage | 4. | \$ | 1,203.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. | \$ | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | | · | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | | | |
| | 4d. Homeowner's association or condominium dues | | 4d. | Ф | 0.00 |

0.00

5. Additional mortgage payments for your residence, such as home equity loans

| Debtor 1 | Andrea McElhone | Ca | ase num | ber (if known) | 18-10743 |
|----------------|--|-----------------------------------|-----------|----------------|------------------------------|
|] 14:11: | sien. | | | | |
| Utili 6a. | ties: Electricity, heat, natural gas | | 6a. | \$ | 162.00 |
| 6b. | Water, sewer, garbage collection | | 6b. | | 100.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cab | lo convicco | 6c. | · | |
| 6d. | Other. Specify: cell phones | ile services | 6d. | · | 250.00 280.00 |
| | | | _ | * | |
| | d and housekeeping supplies | | 7. | * | 410.00 |
| | dcare and children's education costs | | 8. | \$ | 0.00 |
| | hing, laundry, and dry cleaning | | 9. | \$ | 100.00 |
| | sonal care products and services | | 10. | \$ | 100.00 |
| | ical and dental expenses | | 11. | \$ | 20.00 |
| | nsportation. Include gas, maintenance, bus or train not include car payments. | fare. | 12. | \$ | 180.00 |
| | ertainment, clubs, recreation, newspapers, maga | azines, and books | 13. | \$ | 100.00 |
| | ritable contributions and religious donations | ., | 14. | · | 0.00 |
| | rance. | | 17. | – | 0.00 |
| | not include insurance deducted from your pay or inc | luded in lines 4 or 20 | | | |
| | Life insurance | | 15a. | \$ | 0.00 |
| | Health insurance | | 15b. | · | 0.00 |
| | Vehicle insurance | | 15c. | · | 208.00 |
| | Other insurance. Specify: | | 15d. | · - | 0.00 |
| | es. Do not include taxes deducted from your pay or | included in lines 4 or 20 | | Ť | 0.00 |
| Spe | cify: | | _ 16. | \$ | 0.00 |
| | allment or lease payments: | | 170 | • | 0.00 |
| | Car payments for Vehicle 1 | | 17a. | · - | 0.00 |
| | Car payments for Vehicle 2 | | 17b. | | 0.00 |
| | Other. Specify: | | _ 17c. | · - | 0.00 |
| | Other. Specify: | | 17d. | \$ | 0.00 |
| | r payments of alimony, maintenance, and suppo | | 18. | ¢ | 0.00 |
| | ucted from your pay on line 5, Schedule I, Your | | 10. | \$ | |
| Spe | er payments you make to support others who do | o not live with you. | 19. | Φ | 0.00 |
| | er real property expenses not included in lines 4 | or E of this form or on Schodu | _ | ur Incomo | |
| | Mortgages on other property | or 5 or this form or on schedu | 20a. | | 0.00 |
| | Real estate taxes | | 20b. | · | 0.00 |
| | | | 20c. | · - | |
| | Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses | | 20d. | · - | 0.00 |
| | Homeowner's association or condominium dues | | | | |
| | | | 20e. | | 0.00 |
| | er: Specify: | | 21. | +\$ | 0.00 |
| | culate your monthly expenses | | | | |
| | Add lines 4 through 21. | | | \$ | 3,213.00 |
| 22b. | Copy line 22 (monthly expenses for Debtor 2), if ar | ny, from Official Form 106J-2 | | \$ | |
| 22c. | Add line 22a and 22b. The result is your monthly e | expenses. | | \$ | 3,213.00 |
| 0-1- | vulata va uz manthly nat i | | | | |
| | culate your monthly net income. | m Cabadula I | 22- | ¢. | 0.070.00 |
| | Copy line 12 (your combined monthly income) fro | | 23a. | | 3,679.00 |
| 23b. | Copy your monthly expenses from line 22c above |). | 23b. | -\$ | 3,213.00 |
| 23c. | Subtract your monthly expenses from your month | ly income. | _ | | 400.00 |
| | The result is your monthly net income. | • | 23c. | \$ | 466.00 |
| 4. Do v | ou expect an increase or decrease in your expe | enses within the year after you f | file this | form? | |
| For e | example, do you expect to finish paying for your car loan wi | | | | ase or decrease because of a |
| | fication to the terms of your mortgage? | | | | |
| | | | | | |
| \square Y | es. Explain here: | | | | |